| PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004 | | | | | | | | | 10/ 573589 | | | |
|--|--|---|-------------------------|-----------------------------------|--------------------|------------------|------------|---|------------------------|-------------------------------|---------------------|------------------------|
| | | CLAIMS A | (Column 1) (Column 1) | | | (Column 2) | | SMALL EN | TITY | OTHER THAN OR SMALL ENTITY | | |
| U.S. NATIONAL STAGE FEES | | | | | | | 7 | RATE | FEE |]. | RATE | FEE |
| BASIC FEE | | | | | | | 1 | BASIC FEE | | OR | BASIC FEE | 300 |
| EXAMINATION FEE | | | | | | | 1 | EXAM. FEE | | 1 | EXAM. FEE | 200 |
| SEARCH FEE | | | | | | | 1 | SEARCH FEE | | | SEARCH FEE | 400 |
| FEE FOR EXTRA SPEC. PGS. | | | minus 100 = | | | / 50 = | | X \$ 125 = | | | X \$ 250 = | 100 |
| TOTAL CHARGEABLE CLAIMS | | | 8 ml | · E | > | 1 | X \$ 25 =/ | / | OR | X \$ 50 = | | |
| INDEPENDENT CLAIMS | | | 4 1 | * | 1 | 1 | X \$ 100 = | | OR | X \$ 200 = | 200 | |
| MULTIPLE DEPENDENT CLAIM PRE | | | ESENT | | | | 1 | \$ 180 = | | OR | + \$ 360 = | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | TOTAL | | OR | TOTAL | 1100 |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | 5· - | OTHER THAN SMALL ENTITY OR SMALL ENTITY | | | | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUMI PREVIO PAID | BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | · 8 | Minus | " 2 | 0 | - 6 | | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | . 4 | Minus | *** 4 | | =0 | | X \$ 100 = | | OR | X \$ 200 = | ٠ |
| | | | ULTIPLE DEPENDENT CLAIM | | | | + \$ 180 = | | OR | + \$ 360 = | | |
| | 116, | 1.8 | · · | | | | | TOTAL ADDIT. | | OR | TOTAL ADDIT. FFF | |
| | | (Column 1) | | (Colun | nn 2) | (Column 3) | | | | | | |
| AMENDMENT B | · | CLAIMS REMAINING AFTER AMENDMENT | | HIGHI NUME PREVIO PAID I | EST BER USLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • | Minus | ** | | = | 1 | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | • | Minus | *** | | = | 1 | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | LAIM | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | | | | | | TOTAL ADDIT. | | OR | TOTAL ADDIT. FFF | |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |